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**United States Bankruptcy Court**  
of the  
**Northern District Of Illinois**  
**Western Division**

## Trustee's Final Report

In Re: JOHN A. ROTH & DENICE A. SCHAEFER-ROTH  
POST OFFICE BOX 726  
MCHENRY, IL 60051

Case Number: 08-71399  
SSN-xxx-xx-8078 & xxx-xx-5662

Case filed on: 5/2/2008  
Plan Confirmed on:

U Dismissed Unconfirmed

Total funds received and disbursed pursuant to the plan: \$0.00

Detail of Disbursements below:

Claim #	Name of the Claimant	Claimed by the Creditor	Allowed by the Court	Principal Paid	Interest Paid
000	THE LAW OFFICES OF DAVID L. STRETCH	0.00	0.00	0.00	0.00
	Total Legal	0.00	0.00	0.00	0.00
002	INTERNAL REVENUE SERVICE	10,207.38	10,207.38	0.00	0.00
003	INTERNAL REVENUE CENTER	0.00	0.00	0.00	0.00
004	INTERNAL REVENUE CENTER	0.00	0.00	0.00	0.00
	Total Priority	10,207.38	10,207.38	0.00	0.00
024	JOHN A. ROTH	0.00	0.00	0.00	0.00
	Total Debtor Refund	0.00	0.00	0.00	0.00
001	ONYX ACCEPTANCE CORP	4,126.60	4,126.60	0.00	0.00
023	KRISHNAPPA NAYARANA	0.00	0.00	0.00	0.00
	Total Secured	4,126.60	4,126.60	0.00	0.00
001	ONYX ACCEPTANCE CORP	0.00	0.00	0.00	0.00
002	INTERNAL REVENUE SERVICE	4,922.18	4,922.18	0.00	0.00
005	A/R CONCEPTS, INC.	0.00	0.00	0.00	0.00
006	AMERICAN FAMILY INSURANCE GROUP	0.00	0.00	0.00	0.00
007	AT&T MOBILITY	0.00	0.00	0.00	0.00
008	CAPITAL ONE AUTO FINANCE	0.00	0.00	0.00	0.00
009	CENTEGRA NORTHERN ILLINOIS MED CTR	0.00	0.00	0.00	0.00
010	COMED CO	1,213.33	1,213.33	0.00	0.00
011	LAKE / MCHENRY PATHOLOGY ASSOCIATES	0.00	0.00	0.00	0.00
012	LDG FINANCIAL SERVICES, LLC	0.00	0.00	0.00	0.00
013	MHS PHYSICIAN SERVICES	0.00	0.00	0.00	0.00
014	MORaine EMERGENCY PHYSICIANS	0.00	0.00	0.00	0.00
015	NATIONAL ASSET RECOVERY, INC.	0.00	0.00	0.00	0.00
016	NCO FINANCIAL SYSTEMS INC.	0.00	0.00	0.00	0.00
017	NICOR	0.00	0.00	0.00	0.00
018	PORTFOLIO RECOVERY ASSOCIATES	665.29	665.29	0.00	0.00
019	RMS - RECEIVABLE MANAGEMENT	0.00	0.00	0.00	0.00
020	STEVEN J. RESIS, M.D., S.C.	0.00	0.00	0.00	0.00
021	ROUNDUP FUNDING LLC	6,061.23	6,061.23	0.00	0.00
022	WEST ASSET MANAGEMENT	0.00	0.00	0.00	0.00
	Total Unsecured	12,862.03	12,862.03	0.00	0.00
	Grand Total:	27,196.01	27,196.01	0.00	0.00

Total Paid Claimant: \$0.00  
Trustee Allowance: \$0.00  
Percent Paid Unsecured: 0.00

Wherefore, your petitioner prays that a final Decree be entered discharging the trustee and the trustee's surety from any and all liability on account of the within proceedings, and closing the estate, and for such other relief as is just. Pursuant to FRBP, I hereby certify that the subject case has been fully administered.

Report Dated:

/s/ Lydia S. Meyer  
Lydia S. Meyer, Trustee

This is to certify that a copy of this notice has been mailed to the debtor and the debtor's attorney.

Dated at Rockford, IL on 08/28/2008

By /s/Heather M. Fagan